

**BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

**In the Matter of the First Amended  
Accusation Against:**

**Eugene Joseph Reinersman, M.D.**

**Case No. 800-2016-026503**

**Physician's and Surgeon's  
Certificate No. A 116685**

**Respondent**

**DECISION**

**The attached Stipulated Settlement and Disciplinary Order is hereby adopted  
as the Decision and Order of the Medical Board of California, Department of  
Consumer Affairs, State of California.**

**This Decision shall become effective at 5:00 p.m. on November 17, 2017.**

**IT IS SO ORDERED: October 19, 2017.**

**MEDICAL BOARD OF CALIFORNIA**



**Michelle Anne Bholat, M.D., Chair  
Panel B**

1 XAVIER BECERRA  
Attorney General of California  
2 JANE ZACK SIMON  
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6 *Attorneys for Complainant*

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8 **BEFORE THE**  
**MEDICAL BOARD OF CALIFORNIA**  
9 **DEPARTMENT OF CONSUMER AFFAIRS**  
**STATE OF CALIFORNIA**

10 In the Matter of the First Amended Accusation  
Against:

Case No. 800-2016-026503

11 **EUGENE JOSEPH REINERSMAN, M.D.**  
12 406 S. Loomis Avenue  
13 Fort Collins, CO 80521

**STIPULATED SETTLEMENT AND  
DISCIPLINARY ORDER**

14 Physician's and Surgeon's Certificate No.  
15 A116685

16 Respondent.

17  
18 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-  
19 entitled proceedings that the following matters are true:

20 PARTIES

21 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board  
22 of California (Board). She brought this action solely in her official capacity and is represented in  
23 this matter by Xavier Becerra, Attorney General of the State of California, by Jane Zack Simon,  
24 Supervising Deputy Attorney General.

25 2. Respondent Eugene Joseph Reinersman, M.D. is representing himself in this  
26 proceeding.  
27  
28

3. On April 20, 2011, the Board issued Physician's and Surgeon's Certificate No. A116685 to Eugene Joseph Reinersman, M.D. (Respondent). The Physician's and Surgeon's Certificate is renewed and current.

## JURISDICTION

4. First Amended Accusation No. 800-2016-026503 (Accusation) was filed before the Medical Board of California, Department of Consumer Affairs, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent, who timely filed his Notice of Defense contesting the Accusation. A copy of First Amended Accusation No. 800-2016-026503 is attached as exhibit A.

## ADVISEMENT AND WAIVERS

5. Respondent has carefully read and understands the charges and allegations in the Accusation. Respondent has also carefully read and understands the effects of this Stipulated Settlement and Disciplinary Order (Stipulation).

6. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

8. Respondent understands and agrees that the charges and allegations in the Accusation if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate.

9. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual

1 basis for the charges in the Accusation, and that Respondent hereby gives up his right to contest  
2 those charges.

3 10. Respondent agrees that if he ever petitions for early termination or modification of  
4 probation, or if the Board ever petitions for revocation of probation, all of the charges and  
5 allegations contained in First Amended Accusation No. 800-2016-026503 shall be deemed true,  
6 correct and fully admitted by Respondent for purposes of that proceeding or any other licensing  
7 proceeding involving Respondent in the State of California.

8 11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to  
9 discipline and he agrees to be bound by the Board's probationary terms as set forth in the  
10 Disciplinary Order below.

11 CONTINGENCY

12 12. This Stipulation shall be subject to approval by the Board. Respondent understands  
13 and agrees that counsel for Complainant and the staff of the Board may communicate directly  
14 with the Board regarding this Stipulation, without notice to or participation by Respondent. By  
15 signing the Stipulation, Respondent understands and agrees that he may not withdraw his  
16 agreement or seek to rescind the Stipulation prior to the time the Board considers and acts upon it.  
17 If the Board fails to adopt this Stipulation as its Decision and Order, the Stipulated Settlement and  
18 Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible  
19 in any legal action between the parties, and the Board shall not be disqualified from further action  
20 by having considered this matter.

21 13. The parties understand and agree that Portable Document Format (PDF) and facsimile  
22 copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile  
23 signatures thereto, shall have the same force and effect as the originals.

24 14. In consideration of the foregoing admissions and stipulations, the parties agree that  
25 the Board may, without further notice or formal proceeding, issue and enter the following  
26 Disciplinary Order:

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28 ///

**DISCIPLINARY ORDER**

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A116685 issued to Respondent Eugene Joseph Reinersman, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for five (5) years on the following terms and conditions.

1. CONTROLLED SUBSTANCES - ABSTAIN FROM USE. Respondent shall abstain completely from the personal use or possession of controlled substances as defined in the California Uniform Controlled Substances Act, dangerous drugs as defined by Business and Professions Code section 4022, and any drugs requiring a prescription, including cannabis or cannabis products. This prohibition does not apply to medications lawfully prescribed to Respondent by another practitioner for a bona fide illness or condition, except Respondent shall not consume cannabis or cannabis products.

Within 15 calendar days of receiving any lawfully prescribed medications, Respondent shall notify the Board or its designee of the: issuing practitioner's name, address, and telephone number; medication name, strength, and quantity; and issuing pharmacy name, address, and telephone number.

If Respondent has a confirmed positive biological fluid test for any substance (whether or not legally prescribed) and has not reported the use to the Board or its designee, Respondent shall receive a notification from the Board or its designee to immediately cease the practice of medicine. Respondent shall not resume the practice of medicine until the final decision on an accusation and/or a petition to revoke probation. An accusation and/or petition to revoke probation shall be filed by the Board within 30 days of the notification to cease practice. If the Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent stipulates to a later hearing. If the case is heard by an Administrative Law Judge alone, he or she shall forward a Proposed Decision to the Board within 15 days of submission of the matter.

Within 15 days of receipt by the Board of the Administrative Law Judge's Proposed Decision, the Board shall issue its Decision, unless good cause can be shown for the delay. If the case is heard by the Board, the Board shall issue its Decision within 15 days of submission of the case, unless

1 good cause can be shown for the delay. Good cause includes, but is not limited to, non-adoption  
2 of the Proposed Decision, request for reconsideration, remands and other interlocutory orders  
3 issued by the Board. The cessation of practice shall not apply to the reduction of the probationary  
4 time period.

5 If the Board does not file an accusation or petition to revoke probation within 30 days of the  
6 issuance of the notification to cease practice or does not provide Respondent with a hearing  
7 within 30 days of a such a request, the notification of cease practice shall be dissolved.

8 2. ALCOHOL - ABSTAIN FROM USE. Respondent shall abstain completely from  
9 the use of products or beverages containing alcohol.

10 If Respondent has a confirmed positive biological fluid test for alcohol, Respondent shall  
11 receive a notification from the Board or its designee to immediately cease the practice of  
12 medicine. The Respondent shall not resume the practice of medicine until the final decision on an  
13 accusation and/or a petition to revoke probation is effective. An accusation and/or petition to  
14 revoke probation shall be filed by the Board within 30 days of the notification to cease practice.  
15 If the Respondent requests a hearing on the accusation and/or petition to revoke probation, the  
16 Board shall provide the Respondent with a hearing within 30 days of the request, unless the  
17 Respondent stipulates to a later hearing. If the case is heard by an Administrative Law Judge  
18 alone, he or she shall forward a Proposed Decision to the Board within 15 days of submission of  
19 the matter. Within 15 days of receipt by the Board of the Administrative Law Judge's Proposed  
20 Decision, the Board shall issue its Decision, unless good cause can be shown for the delay. If the  
21 case is heard by the Board, the Board shall issue its Decision within 15 days of submission of the  
22 case, unless good cause can be shown for the delay. Good cause includes, but is not limited to,  
23 non-adoption of the Proposed Decision, request for reconsideration, remands and other  
24 interlocutory orders issued by the Board. The cessation of practice shall not apply to the  
25 reduction of the probationary time period.

26 If the Board does not file an accusation or petition to revoke probation within 30 days of the  
27 issuance of the notification to cease practice or does not provide Respondent with a hearing  
28 within 30 days of a such a request, the notification of cease practice shall be dissolved.

1           3.       PSYCHIATRIC/SUBSTANCE ABUSE EVALUATION. At the Board's  
2 discretion, and on whatever periodic basis that may be required by the Board or its designee,  
3 Respondent shall undergo and complete a psychiatric and/or substance abuse evaluation (and  
4 psychological testing, if deemed necessary) by a Board-appointed board certified physician and  
5 surgeon, who shall consider any information provided by the Board or its designee and any other  
6 information the evaluator deems relevant, and shall furnish a written evaluation report to the  
7 Board or its designee. Respondent shall pay the cost of all evaluations and associated testing.

8           Respondent shall comply with all restrictions or conditions recommended by the  
9 evaluator(s) within 15 calendar days after being notified by the Board or its designee.

10          4.       SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging  
11 in the solo practice of medicine. Prohibited solo practice includes, but is not limited to, a  
12 practice where: 1) Respondent merely shares office space with another physician but is not  
13 affiliated for purposes of providing patient care, or 2) Respondent is the sole physician  
14 practitioner at that location. If Respondent fails to establish a practice with another physician  
15 or secure employment in an appropriate practice setting within 60 calendar days of the  
16 effective date of this Decision, Respondent shall receive a notification from the Board or its  
17 designee to cease the practice of medicine within three (3) calendar days after being so  
18 notified. The Respondent shall not resume practice until an appropriate practice setting is  
19 established. If, during the course of the probation, Respondent's practice setting changes and  
20 Respondent is no longer practicing in a setting in compliance with this Decision, the  
21 Respondentshall notify the Board or its designee within 5 calendar days of the practice setting  
22 change. If Respondent fails to establish a practice with another physician or secure  
23 employment in an appropriate practice setting within 60 calendar days of the practice setting  
24 change, Respondent shall receive a notification from the Board or its designee to cease the  
25 practice of medicine within three (3) calendar days after being so notified. The Respondent  
26 shall not resume practice until an appropriate practice setting is established.

27          5.       NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven  
28 (7) days of the effective date of this Decision, Respondent shall provide to the Board the names,

1 physical addresses, mailing addresses, and telephone numbers of any and all employers and  
2 supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's  
3 worksite monitor, and Respondent's employers and supervisors to communicate regarding  
4 Respondent's work status, performance, and monitoring.

5 For purposes of this section, "supervisors" shall include the Chief of Staff and Health or  
6 Well Being Committee Chair, or equivalent, if applicable, when Respondent has medical staff  
7 privileges.

8 6. BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to  
9 biological fluid testing, at Respondent's expense, upon request of the Board or its designee.  
10 "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair  
11 follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall  
12 make daily contact with the Board or its designee to determine whether biological fluid testing is  
13 required. Respondent shall be tested on the date of the notification as directed by the Board or its  
14 designee. The Board may order Respondent to undergo a biological fluid test on any day, at any  
15 time, including weekends and holidays. Except when testing on a specific date as ordered by the  
16 Board or its designee, the scheduling of biological fluid testing shall be done on a random basis.  
17 The cost of biological fluid testing shall be borne by the Respondent.

18 For the duration of the probationary term, up to five (5) years, Respondent shall be subject  
19 to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the  
20 previous five (5) consecutive years of probation, may testing be reduced to one (1) time per  
21 month. Nothing precludes the Board from increasing the number of random tests to the first-year  
22 level of frequency for any reason, which is 52 to 104 random tests per year.

23 Prior to practicing medicine in California, Respondent shall contract with a laboratory or  
24 service, approved in advance by the Board or its designee, that will conduct random,  
25 unannounced, observed, biological fluid testing and meets all the following standards:

- 26 (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry  
27 Association or have completed the training required to serve as a collector for the United  
28 States Department of Transportation.

- 1 (b) Its specimen collectors conform to the current United States Department of  
2 Transportation Specimen Collection Guidelines
- 3 (c) Its testing locations comply with the Urine Specimen Collection Guidelines published  
4 by the United States Department of Transportation without regard to the type of test  
5 administered.
- 6 (d) Its specimen collectors observe the collection of testing specimens.
- 7 (e) Its laboratories are certified and accredited by the United States Department of Health  
8 and Human Services.
- 9 (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day  
10 of receipt and all specimens collected shall be handled pursuant to chain of custody  
11 procedures. The laboratory shall process and analyze the specimens and provide legally  
12 defensible test results to the Board within seven (7) business days of receipt of the  
13 specimen. The Board will be notified of non-negative results within one (1) business day  
14 and will be notified of negative test results within seven (7) business days.
- 15 (g) Its testing locations possess all the materials, equipment, and technical expertise  
16 necessary in order to test Respondent on any day of the week.
- 17 (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens  
18 for the detection of alcohol and illegal and controlled substances.
- 19 (i) It maintains testing sites located throughout California.
- 20 (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line  
21 computer database that allows the Respondent to check in daily for testing.
- 22 (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff  
23 access to drug test results and compliance reporting information that is available 24 hours a  
24 day.
- 25 (l) It employs or contracts with toxicologists that are licensed physicians and have  
26 knowledge of substance abuse disorders and the appropriate medical training to interpret  
27 and evaluate laboratory biological fluid test results, medical histories, and any other  
28 information relevant to biomedical information.

1 (m) It will not consider a toxicology screen to be negative if a positive result is obtained  
2 while practicing, even if the Respondent holds a valid prescription for the substance.

3 Prior to changing testing locations for any reason, including during vacation or other travel,  
4 alternative testing locations must be approved by the Board and meet the requirements above.

5 The contract shall require that the laboratory directly notify the Board or its designee of  
6 non-negative results within one (1) business day and negative test results within seven (7)  
7 business days of the results becoming available. Respondent shall maintain this laboratory or  
8 service contract during the period of probation.

9 A copy of any laboratory test result may be received in evidence in any proceedings  
10 between the Board and Respondent.

11 If a biological fluid test result indicates Respondent has used, consumed, ingested, or  
12 administered to himself or herself a prohibited substance, the Board shall order Respondent to  
13 cease practice and instruct Respondent to leave any place of work where Respondent is practicing  
14 medicine or providing medical services. The Board shall immediately notify all of Respondent's  
15 employers, supervisors and work monitors, if any, that Respondent may not practice medicine or  
16 provide medical services while the cease-practice order is in effect.

17 A biological fluid test will not be considered negative if a positive result is obtained while  
18 practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited  
19 substance use exists, the Board shall lift the cease-practice order within one (1) business day.

20 After the issuance of a cease-practice order, the Board shall determine whether the positive  
21 biological fluid test is in fact evidence of prohibited substance use by consulting with the  
22 specimen collector and the laboratory, communicating with the licensee, his or her treating  
23 physician(s), other health care provider, or group facilitator, as applicable.

24 For purposes of this condition, the terms "biological fluid testing" and "testing" mean the  
25 acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

26 For purposes of this condition, the term "prohibited substance" means an illegal drug, a  
27 lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by  
28 Respondent and approved by the Board, alcohol, or any other substance Respondent has been

1 instructed by the Board not to use, consume, ingest, or administer to himself or herself.

2 If the Board confirms that a positive biological fluid test is evidence of use of a prohibited  
3 substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the  
4 Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to  
5 any other terms or conditions the Board determines are necessary for public protection or to  
6 enhance Respondent's rehabilitation.

7 7. SUBSTANCE ABUSE SUPPORT GROUP MEETINGS. Within thirty (30) days  
8 of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its  
9 prior approval, the name of a substance abuse support group which he shall attend for the duration  
10 of probation. Respondent shall attend substance abuse support group meetings at least once per  
11 week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse  
12 support group meeting costs.

13 The facilitator of the substance abuse support group meeting shall have a minimum of three  
14 (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed  
15 or certified by the state or nationally certified organizations. The facilitator shall not have a  
16 current or former financial, personal, or business relationship with Respondent within the last five  
17 (5) years. Respondent's previous participation in a substance abuse group support meeting led by  
18 the same facilitator does not constitute a prohibited current or former financial, personal, or  
19 business relationship.

20 The facilitator shall provide a signed document to the Board or its designee showing  
21 Respondent's name, the group name, the date and location of the meeting, Respondent's  
22 attendance, and Respondent's level of participation and progress. The facilitator shall report any  
23 unexcused absence by Respondent from any substance abuse support group meeting to the Board,  
24 or its designee, within twenty-four (24) hours of the unexcused absence.

25 8. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within  
26 thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the  
27 Board or its designee for prior approval as a worksite monitor, the name and qualifications of one  
28 or more licensed physician and surgeon, other licensed health care professional if no physician

1 and surgeon is available, or, as approved by the Board or its designee, a person in a position of  
2 authority who is capable of monitoring the Respondent at work.

3 The worksite monitor shall not have a current or former financial, personal, or familial  
4 relationship with Respondent, or any other relationship that could reasonably be expected to  
5 compromise the ability of the monitor to render impartial and unbiased reports to the Board or its  
6 designee. If it is impractical for anyone but Respondent's employer to serve as the worksite  
7 monitor, this requirement may be waived by the Board or its designee, however, under no  
8 circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

9 The worksite monitor shall have an active unrestricted license with no disciplinary action  
10 within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms  
11 and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth  
12 by the Board or its designee.

13 Respondent shall pay all worksite monitoring costs.

14 The worksite monitor shall have face-to-face contact with Respondent in the work  
15 environment on as frequent a basis as determined by the Board or its designee, but not less than  
16 once per week; interview other staff in the office regarding Respondent's behavior, if requested  
17 by the Board or its designee; and review Respondent's work attendance.

18 The worksite monitor shall verbally report any suspected substance abuse to the Board and  
19 Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected  
20 substance abuse does not occur during the Board's normal business hours, the verbal report shall  
21 be made to the Board or its designee within one (1) hour of the next business day. A written  
22 report that includes the date, time, and location of the suspected abuse; Respondent's actions; and  
23 any other information deemed important by the worksite monitor shall be submitted to the Board  
24 or its designee within 48 hours of the occurrence.

25 The worksite monitor shall complete and submit a written report monthly or as directed by  
26 the Board or its designee which shall include the following: (1) Respondent's name and  
27 Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3)  
28 the worksite monitor's license number, if applicable; (4) the location or location(s) of the

1 worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the  
2 names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;  
3 (8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can  
4 lead to suspected substance abuse by Respondent. Respondent shall complete any required  
5 consent forms and execute agreements with the approved worksite monitor and the Board, or its  
6 designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

7 If the worksite monitor resigns or is no longer available, Respondent shall, within five (5)  
8 calendar days of such resignation or unavailability, submit to the Board or its designee, for prior  
9 approval, the name and qualifications of a replacement monitor who will be assuming that  
10 responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a  
11 replacement monitor within sixty (60) calendar days of the resignation or unavailability of the  
12 monitor, Respondent shall receive a notification from the Board or its designee to cease the  
13 practice of medicine within three (3) calendar days after being so notified. Respondent shall  
14 cease the practice of medicine until a replacement monitor is approved and assumes monitoring  
15 responsibility.

16 9. VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING  
17 LICENSEES. Failure to fully comply with any term or condition of probation is a violation of  
18 probation.

19 A. If Respondent commits a major violation of probation as defined by section  
20 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take  
21 one or more of the following actions:

22 (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical  
23 diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of  
24 Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice  
25 order issued by the Board or its designee shall state that Respondent must test negative for at least  
26 a month of continuous biological fluid testing before being allowed to resume practice. For  
27 purposes of the determining the length of time a Respondent must test negative while undergoing  
28 continuous biological fluid testing following issuance of a cease-practice order, a month is

1 defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until  
2 notified in writing by the Board or its designee that he or she may do so.

3 (2) Increase the frequency of biological fluid testing.

4 (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or  
5 other action as determined by the Board or its designee.

6 B. If Respondent commits a minor violation of probation as defined by section  
7 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take  
8 one or more of the following actions:

9 (1) Issue a cease-practice order;

10 (2) Order practice limitations;

11 (3) Order or increase supervision of Respondent;

12 (4) Order increased documentation;

13 (5) Issue a citation and fine, or a warning letter;

14 (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in  
15 accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of  
16 Regulations, at Respondent's expense;

17 (7) Take any other action as determined by the Board or its designee.

18 C. Nothing in this Decision shall be considered a limitation on the Board's authority  
19 to revoke Respondent's probation if he or she has violated any term or condition of probation. If  
20 Respondent violates probation in any respect, the Board, after giving Respondent notice and the  
21 opportunity to be heard, may revoke probation and carry out the disciplinary order that was  
22 stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed  
23 against Respondent during probation, the Board shall have continuing jurisdiction until the matter  
24 is final, and the period of probation shall be extended until the matter is final.

25 10. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the  
26 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the  
27 Chief Executive Officer at every hospital where privileges or membership are extended to  
28 Respondent, at any other facility where Respondent engages in the practice of medicine,

1 including all physician and locum tenens registries or other similar agencies, and to the Chief  
2 Executive Officer at every insurance carrier which extends malpractice insurance coverage to  
3 Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15  
4 calendar days.

5 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

6 11. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE  
7 NURSES. During probation, Respondent is prohibited from supervising physician assistants and  
8 advanced practice nurses.

9 12. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all  
10 rules governing the practice of medicine in California and remain in full compliance with any  
11 court ordered criminal probation, payments, and other orders.

12 13. QUARTERLY DECLARATIONS. Respondent shall submit quarterly  
13 declarations under penalty of perjury on forms provided by the Board, stating whether there has  
14 been compliance with all the conditions of probation.

15 Respondent shall submit quarterly declarations not later than 10 calendar days after the end  
16 of the preceding quarter.

17 14. GENERAL PROBATION REQUIREMENTS.

18 Compliance with Probation Unit

19 Respondent shall comply with the Board's probation unit.

20 Address Changes

21 Respondent shall, at all times, keep the Board informed of Respondent's business and  
22 residence addresses, email address (if available), and telephone number. Changes of such  
23 addresses shall be immediately communicated in writing to the Board or its designee. Under no  
24 circumstances shall a post office box serve as an address of record, except as allowed by Business  
25 and Professions Code section 2021(b).

26 Place of Practice

27 Respondent shall not engage in the practice of medicine in Respondent's or patient's place  
28 of residence, unless the patient resides in a skilled nursing facility or other similar licensed

1 facility.

2 License Renewal

3 Respondent shall maintain a current and renewed California physician's and surgeon's  
4 license.

5 Travel or Residence Outside California

6 Respondent shall immediately inform the Board or its designee, in writing, of travel to any  
7 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty  
8 (30) calendar days.

9 In the event Respondent should leave the State of California to reside or to practice  
10 Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of  
11 departure and return.

12 15. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be  
13 available in person upon request for interviews either at Respondent's place of business or at the  
14 probation unit office, with or without prior notice throughout the term of probation.

15 16. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board  
16 or its designee in writing within 15 calendar days of any periods of non-practice lasting more than  
17 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is  
18 defined as any period of time Respondent is not practicing medicine as defined in Business and  
19 Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct  
20 patient care, clinical activity or teaching, or other activity as approved by the Board. If  
21 Respondent resides in California and is considered to be in non-practice, Respondent shall  
22 comply with all terms and conditions of probation. All time spent in an intensive training  
23 program which has been approved by the Board or its designee shall not be considered non-  
24 practice and does not relieve Respondent from complying with all terms and conditions of  
25 probation. Practicing medicine in another state of the United States or Federal jurisdiction while  
26 on probation with the medical licensing authority of that state or jurisdiction shall not be  
27 considered non-practice. A Board-ordered suspension of practice shall not be considered as a  
28 period of non-practice.

1 In the event Respondent's period of non-practice while on probation exceeds 18 calendar  
2 months, Respondent shall successfully complete the Federation of State Medical Board's Special  
3 Purpose Examination, or, at the Board's discretion, a clinical competence assessment program  
4 that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model  
5 Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

6 Respondent's period of non-practice while on probation shall not exceed two (2) years.

7 Periods of non-practice will not apply to the reduction of the probationary term.

8 Periods of non-practice for a Respondent, living outside of California, will relieve  
9 Respondent of the responsibility to comply with the probationary terms and conditions with the  
10 exception of this condition and the following terms and conditions of probation: Obey All Laws;  
11 and General Probation Requirements; Quarterly Declarations; Abstain from Use of Alcohol  
12 and/or Controlled Substances; and Biological Fluid Testing.

13 17. COMPLETION OF PROBATION. Respondent shall comply with all financial  
14 obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the  
15 completion of probation. Upon successful completion of probation, Respondent's certificate shall  
16 be fully restored.

17 18. VIOLATION OF PROBATION. Failure to fully comply with any term or  
18 condition of probation is a violation of probation. If Respondent violates probation in any  
19 respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke  
20 probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to  
21 Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation,  
22 the Board shall have continuing jurisdiction until the matter is final, and the period of probation  
23 shall be extended until the matter is final.

24 19. LICENSE SURRENDER. Following the effective date of this Decision, if  
25 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy  
26 the terms and conditions of probation, Respondent may request to surrender his or her license.  
27 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in  
28 determining whether or not to grant the request, or to take any other action deemed appropriate

1 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent  
2 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its  
3 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject  
4 to the terms and conditions of probation. If Respondent re-applies for a medical license, the  
5 application shall be treated as a petition for reinstatement of a revoked certificate.

6 20. PROBATION MONITORING COSTS. Respondent shall pay the costs associated  
7 with probation monitoring each and every year of probation, as designated by the Board, which  
8 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of  
9 California and delivered to the Board or its designee no later than January 31 of each calendar  
10 year.

11 ACCEPTANCE

12 I have carefully read the above Stipulated Settlement and Disciplinary Order. I understand  
13 the Stipulation and the effect it will have on my Physician's and Surgeon's Certificate. I enter into  
14 this Stipulated Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and  
15 agree to be bound by the Decision and Order of the Medical Board of California.

16  
17 DATED: 10-3-17

EUGENE JOSEPH REINERSMAN, M.D.  
Respondent

18  
19  
20 ENDORSEMENT

21 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully  
22 submitted for consideration by the Medical Board of California.

23  
24 Dated: October 4, 2017

Respectfully submitted,

25 XAVIER BECERRA  
Attorney General of California

26 JANE ZACK SIMON  
27 Supervising Deputy Attorney General  
28

## EXHIBIT A

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*Attorneys for Complainant*

BEFORE THE  
MEDICAL BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA

In the Matter of the First Amended Accusation  
Against:

Case No. 800-2016-026503

**EUGENE JOSEPH REINERSMAN, M.D.**  
406 S. Loomis Avenue  
Fort Collins, CO 80521

**FIRST AMENDED ACCUSATION**

Physician's and Surgeon's Certificate  
No. A116685,

Respondent.

The Complainant alleges:

1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board of California, Department of Consumer Affairs, and brings this First Amended Accusation solely in her official capacity.

2. On April 20, 2011, Physician's and Surgeon's Certificate No. A116685 was issued by the Medical Board of California to Eugene Joseph Reinersman, M.D. (Respondent.) The certificate is in delinquent status, having expired on March 31, 2017.

**JURISDICTION**

3. This First Amended Accusation is brought before the Medical Board of California (Board) under the authority of the following sections of the California Business and Professions Code (Code) and/or other relevant statutory enactment:

///

1       A.    Section 2227 of the Code provides in part that the Board may revoke, suspend for a  
2 period not to exceed one year, or place on probation, the license of any licensee who has been  
3 found guilty under the Medical Practice Act, and may recover the costs of probation monitoring.

4       B.    Section 2305 of the Code provides, in part, that the revocation, suspension, or other  
5 discipline, restriction or limitation imposed by another state upon a license to practice medicine  
6 issued by that state, or the revocation, suspension, or restriction of the authority to practice  
7 medicine by any agency of the federal government, that would have been grounds for discipline  
8 in California under the Medical Practice Act, constitutes grounds for discipline for unprofessional  
9 conduct.

10       C.    Section 820 of the Code states:

11                "Whenever it appears that any person holding a license, certificate or  
12 permit under this division or under any initiative act referred to in this  
13 division may be unable to practice his or her profession safely because the  
14 licentiate's ability to practice is impaired due to mental illness, or physical  
15 illness affecting competency, the licensing agency may order the licentiate  
to be examined by one or more physicians and surgeons or psychologists  
designated by the agency. The report of the examiners shall be made  
available to the licentiate and may be received as direct evidence in  
proceedings conducted pursuant to Section 822."

16       D.    Section 822 of the Code states:

17                "If a licensing agency determines that its licentiate's ability to practice his  
18 or her profession safely is impaired because the licentiate is mentally ill, or  
19 physically ill affecting competency, the licensing agency may take action  
by any one of the following methods:

- 20                (a) Revoking the licentiate's certificate or license.  
21                (b) Suspending the licentiate's right to practice.  
22                (c) Placing the licentiate on probation.  
23                (d) Taking such other action in relation to the licentiate as the licensing  
24 agency in its discretion deems proper.

25                The licensing agency shall not reinstate a revoked or suspended certificate  
26 or license until it has received competent evidence of the absence or  
27 control of the condition which caused its action and until it is satisfied that  
28 with due regard for the public health and safety the person's right to  
practice his or her profession may be safely reinstated."

29       E.    Section 2239 of the Code provides that it is unprofessional conduct for a licensee to  
30 use alcohol, dangerous drugs or controlled substances to the extent or in such a manner as to be

1 dangerous to the licensee or to any other person or to the public, or to the extent that such use  
2 impairs the ability of the licensee to practice medicine safely.

3 **FIRST CAUSE FOR BOARD ACTION**

4 (Discipline, Restriction, or Limitation Imposed by Another State)

5 4. On September 19, 2016, the Colorado Medical Board issued a "Non-Disciplinary  
6 Interim Cessation of Practice Agreement" under which Respondent is prohibited from performing  
7 any act requiring a license. The Interim Cessation of Practice Agreement states that the Colorado  
8 Physician Health Program had determined that Respondent has a physical or mental illness or  
9 condition that renders him unsafe to practice medicine. The Interim Cessation of Practice  
10 Agreement was entered into pending further evaluation and investigation of Respondent to  
11 determine what further action, if any, are warranted. A copy of the Interim Cessation of Practice  
12 Agreement issued by the Colorado Medical Board is attached as Exhibit A.

13 5. The action of the Colorado Medical Board, as set forth in paragraph 4, above,  
14 constitutes cause for action pursuant to Section 2305 of the Code.

15 **SECOND CAUSE FOR BOARD ACTION**

16 (Alcohol Abuse)

17 6. On December 5, 2016, the Board issued an Order Compelling Mental and/or Physical  
18 Examination of Licensee, directing Respondent to submit to an evaluation. Respondent thereafter  
19 underwent a full evaluation by a Board appointed psychiatrist, who noted a history of alcohol use  
20 and recreational use of drugs, including prescription opiates and cannabis, and an  
21 acknowledgment by Respondent that he is an alcoholic. The evaluator concluded that Respondent  
22 has an Alcohol Use Disorder and Cannabis and Hashish Use Disorder. The psychiatrist further  
23 concluded that Respondent can safely practice medicine, but only if he undergoes appropriate  
24 treatment and monitoring for his substance abuse disorder.

25 7. Respondent's certificate is subject to Board action pursuant to Sections 822 and 2227  
26 of the Code, in that as a result of a substance abuse disorder, he is unable to safely practice  
27 medicine without appropriate treatment and monitoring.  
28

8. Respondent's certificate is subject to Board action pursuant to Section 2239 of the Code based on his use of alcoholic beverages and/or controlled substances, as described above, to such an extent as to be dangerous to himself and or others, and/or to impair his ability to safely practice medicine.

## PRAYER

**WHEREFORE**, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board issue a decision:

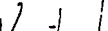
1. Revoking or suspending Physician's and Surgeon's Certificate Number A116685 issued to Respondent Eugene Joseph Reinersman, M.D.;

2. Revoking, suspending or denying approval of Respondent's authority to supervise physician assistants and advanced practice nurses;

3. Ordering Respondent, if placed on probation, to pay the costs of probation monitoring; and

4. Taking such other and further action as the Board deems necessary and proper.

DATED: May 25, 2017

  
KIMBERLY KIRCHMEYER  
Executive Director  
Medical Board of California  
Department of Consumer Affairs  
State of California  
*Complainant*

# EXHIBIT A



BEFORE THE COLORADO MEDICAL BOARD  
STATE OF COLORADO  
CASE NO. 2016-1705-B

---

NON-DISCIPLINARY INTERIM CESSATION OF PRACTICE AGREEMENT

---

IN THE MATTER OF THE LICENSE TO PRACTICE AS A PHYSICIAN IN THE STATE  
OF COLORADO OF EUGENE J. REINERSMAN, M.D., LICENSE NO. DR-51821,

Respondent.

---

IT IS HEREBY STIPULATED and agreed by and between Inquiry Panel B ("Panel") of the Colorado Medical Board ("Board") and Eugene J. Reinersman, M.D. ("Respondent") (collectively "the parties"), as follows:

1. Respondent was licensed to practice as a physician in the state of Colorado on October 24, 2012, and was issued license number DR-51821, which Respondent has held continuously since that date.
2. The Panel and the Board have jurisdiction over Respondent and over the subject matter of this proceeding.
3. On September 15, 2016, the Panel reviewed materials relating to case number 2016-1705-B, including information that the Colorado Physician Health Program has determined that Respondent has a physical or mental illness or condition that renders him unsafe to practice medicine.
4. Respondent denies any and all allegations of a violation of the Medical Practice Act. Respondent voluntarily enters into this agreement to facilitate further evaluation of the issues related to Board case number 2016-1705-B.
5. Based upon the information and the totality of the circumstances, Respondent has offered to enter into an agreement for Respondent not to practice as a physician in the interim as set forth in more detail below, and the Panel has authorized the parties to enter into an agreement for Respondent to limit his practice as a physician.
6. The parties have agreed to enter into this Non-Disciplinary Interim Cessation of Practice Agreement ("Interim Agreement") pending further evaluation and investigation of Respondent to determine what further actions, if any, are warranted. Any summary suspension that could be imposed by the Panel is hereby stayed pursuant to the terms of this Interim Agreement.

7. Respondent agrees that he will not perform any act requiring a license issued by the Board while this Interim Agreement is in effect.

8. This Interim Agreement shall remain in effect until such time as the parties reach a final disposition of this case or, in the event summary suspension proceedings are initiated, an order for summary suspension enters.

9. The Panel agrees that it will not institute summary suspension proceedings while this Interim Agreement is in effect so long as the Respondent remains in compliance with this Interim Agreement and so long as the Panel does not learn of new information that would indicate that summary suspension is warranted.

10. Nothing in this Interim Agreement shall constitute disciplinary action, a finding that Respondent has engaged in unprofessional conduct, or any admission by Respondent of unprofessional conduct. There have been no final determinations regarding Respondent's professional competence or professional conduct. Nothing in this Interim Agreement shall constitute final actions as defined in section 24-4-102(1), C.R.S.

11. Nothing in this Interim Agreement shall preclude the Panel from initiating disciplinary action pursuant to section 12-36-118, C.R.S., or issuing a Final Agency Order while this Interim Agreement is in effect.

12. Respondent understands that Respondent has the right to be represented by counsel of Respondent's choice in this matter, and Respondent is represented by counsel in this matter.

13. The terms of this Interim Agreement were mutually negotiated and determined.

14. Both parties acknowledge that they understand the legal consequences of this Interim Agreement, both parties enter into this Interim Agreement voluntarily, and both parties agree that no term or condition of this Interim Agreement is unconscionable.

15. This Interim Agreement and all its terms constitute a valid board order for purposes of section 12-36-117(1)(u), C.R.S.

16. So that the Board may notify hospitals of this Interim Agreement, Respondent presently holds privileges at the following hospitals:

-none-

17. Invalidation of any portion of this Interim Agreement by judgment or court order shall in no way affect any other provision, which provision shall remain in full force and effect.

18. This Interim Agreement shall be effective upon signature by Respondent. Respondent acknowledges that the Panel may choose not to accept the terms of this Interim Agreement and that if the Interim Agreement is not approved by the Panel and signed by a Panel member or other authorized person, it is void.

19. This Interim Agreement constitutes the entire agreement between the parties, and there are no other agreements or promises, written or oral, which modify, interpret, construe or affect this Interim Agreement.


20. All costs and expenses incurred by Respondent to comply with this Interim Agreement shall be the sole responsibility of Respondent, and shall in no way be the obligation of the Board or Panel.

21. Upon becoming effective, this Interim Agreement shall be open to public inspection and shall be publicized pursuant to the Board's standard policies and procedures. While this Interim Agreement does not constitute discipline against Respondent's license, it may be reported to the Federation of State Medical Boards, the National Practitioner Data Bank and as otherwise required by law.

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EUGENE J. REINERSMAN, M.D.

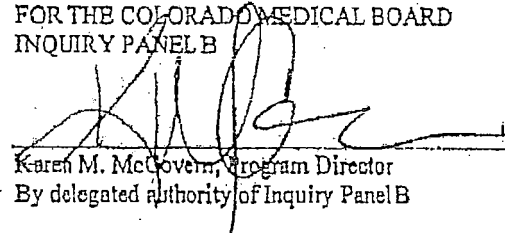
THE FOREGOING was acknowledged before me this 19 day of September, 2016, by  
EUGENE J. REINERSMAN, M.D., in the County of Clayton State of Georgia

  
NOTARY PUBLIC  
August 30, 2019  
Commission expires August 30, 2019



THE FOREGOING Non-Disciplinary Interim Cessation of Practice Agreement is  
effective upon signature by Respondent, above, and is approved this 14<sup>th</sup> day of September,  
2016.

FOR THE COLORADO MEDICAL BOARD  
INQUIRY PANEL B



Karen M. McGovern, Program Director  
By delegated authority of Inquiry Panel B


APPROVED AS TO FORM:

FOR RESPONDENT  
EUGENE J. REINERSMAN, M.D.

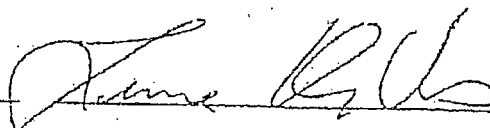
FOR THE COLORADO MEDICAL BOARD

SILVER & DEBOSKEY

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